**附件1**

**乐陵市城市社区工作者补充招聘报名登记表**

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| **姓 名** |  | | | | | | | **性别** | | | |  | | | | **出生年月** | | | | |  | | | | | | **贴照片处** |
| **身份证号** |  |  |  |  | |  |  | |  | |  | | |  |  | |  |  |  | |  |  | |  |  |  |
| **政治面貌** |  | | | | **学历**  **学位** | | | | | | | |  | | | | | | | **民族** | | |  | | | |
| **毕业院校**  **及时间** |  | | | | | | | | | | | | **所学专业** | | | | | | |  | | | | | | |
| **现居住地** |  | | | | | | | | | | | | **联系电话** | | | | | | | **1、** | | | | | | | |
| **户 口 所在地** |  | | | | | | | | | | | | **2、（紧急情况联系人）** | | | | | | | |
| **本人学习工作经历（高中开始）** |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **荣誉或特长** |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **家庭成员** | **姓名** | | | | **关系** | | | | | **所在单位及职务** | | | | | | | | | | | | | | | | | |
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| 承诺：本人符合报名条件要求，在报名表中填报的信息真实、准确。所提供的学历证书等相关证件均真实有效。如有弄虚作假或填写错误，由本人承担一切后果，并自愿接受有关部门的处理。  本人签名： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 资格审查人员（签字）： 复核人签字： | | | | | | | | | | | | | | | | | | | | | | | | | | | |

注：此表一式四份